## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10750669

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	OR <b>7</b>	RATE	FEE
FC	 DR	•	NUMBER FILED		NUMBER EXTRA			BASIC FEE	<del> </del>	OR	BASIC FEE	·
TC	TAL CHARGE	ABLE CLAIMS			*		-	X\$ 9=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	/ mi	nus 3 =	*			X43=		OR	X86=	
ML	ILTIPLE DEPE	NDENT CLAIM P		_			+145=		OR	+290=		
* If	the difference	in column 1 is	ero, enter	"0" in c	column 2	L	TOTAL		OR	TOTAL	<u> </u>	
	C	LAIMS AS A	MENDED	) - PART II			<del></del>			_	OTHER	
	· · · · · · · · · · · · · · · · · · ·		(Column		(Column 3)		SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AIRA	=		X43=	1	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL	<u> </u>		TOTAL ADDIT. FEE	
		7	DDIT. FEE		. ,	ADDII. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	• .	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CL AIN	=		X43=		OR	X86=	
	FIRST PRESE	NIATION OF MC	LIPLE DEP	ENDENT	CLAIN			+145=		OR	+290=	•
							Al	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	ì				•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
** [	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
		ber Previously Paid					foun	d in th appr	ropriate box	in colu	ımn 1.	